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	Lies constate schodule	FOR LINE NUMBER: PAGE 1343 / 1859
SCHEDULE A (FEC Form 3)	Use separate schedule each category of the	
ITEMIZED RECEIPTS	Detailed Summary F	
	i	
commercial purposes, other than using the name	tements may not be sold or used by and address of any political committee	any person for the purpose of soliciting contributions or for e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Donna Edwards for Senate		
Full Name (Last. First, Middle Initial) ACTBLUE		Date of Receipt
Mailing Address PO Box 441146	·	01 11 2016
City	State Zip Code	Transaction Id: VPFNQGF6VM1E
West Somerville	MA 02144-0031	
FEC ID number of contributing federal political committee.	C. C00401224	Amount of Each Receipt this Period
Name of Employer	Occupation	2700.00
Name of Employer	Conduit total listed in Agg. field	✓ Memo Item
Receipt For: 2016	Election Cycle-to-Date	O 4 % 45 - a considered through
✓ Primary ☐ General	611009	Note: Above Contribution earmarked through this organization.
Other (specify)	01100	
Full Name (Last, First, Middle Initial) Edwin Schlossberg		Date of Receipt
Mailing Address 111 5th Ave		
FI 12		01 08 2016
City	State Zip Code NY 10003-1005	Transaction Id: VPFNQGFBBE8
New York	141 10003-1003	m
FEC ID number of contributing federal political committee.	C!	Amount of Each Receipt this Period
Name of Employer	Occupation	
ESI Design	President	Memo Item
Receipt For: 2016	Election Cycle-to-Date	A.S
□ Primary ☑ General	500	* Earmarked Contribution: See Below
Other (specify)	300	0.30
Full Name (Last, First, Middle Initial)		
ACTBLUE		Date of Receipt
Mailing Address PO Box 441146		01 11 2016
City	State Zip Code	Transaction Id: VPFNQGFBBE8E
West Somerville	MA 02144-0031	
FEC ID number of contributing	C C00401224	Amount of Each Receipt this Period
federal political committee.		2300.00
Name of Employer	Occupation Conduit total listed in Agg. field	✓ Memo Item
Receipt For: 2016	Election Cycle-to-Date	
Primary General		Note: Above Contribution earmarked through this organization.
Other (specify)	6110	U9.29 Will Organization.
SUBTOTAL of Receipts This Page (optional)		2300.00
TOTAL This Period (last page this line number	only)	